

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	hsp		3/8/00
O.I.P.E. CLASSIFIER		49	3/16/00
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW	Dm	72223	4-13-00

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral) Canceled A Appeal
 + Restricted O Objected

Claim	Date
Final	
Original	
1	6/1/01
2	6/1/01
3	6/1/01
4	6/1/01
5	6/1/01
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8	6/1/01
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49	6/1/01
50	6/1/01

Claim	Date
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Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
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